NOTICE OF FEE DUE

DATE:	11/05/04	_		i	
TO:	ISSUE FOR	_			
FROM:	Office of Initial Patent Examina	tion			
SUBJECT	Fee Due				
APPLICATIO	N NUMBER 106465	92			
Office for the authorization	or the attached document submitter following reason. Please check the to charge a deposit account. If an ee. If an authorization is not present.	he application authorization	for the ap	ppropriate t, please char	ge the
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If you have any o Eleanor Kurtz 70	questions, please contact Cynthia Str 03-308-3642	eater at 703-30	6-5430 or		
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